

**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED

Apr 27, 2005 08:00 AM
Secretary of State

DOCUMENT # P03000157724 1. Entity Name J POWELL INC.	
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Principal Place of Business 1817 N FORSYTH RD ORLANDO, FL 32807 US	Mailing Address 1817 N FORSYTH RD ORLANDO, FL 32807 US
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04142005 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 20-0573781	Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

**ACTIVE FILINGS, LLC
10651 NE 11TH COURT
MIAMI SHORES, FL 33138**

**DO NOT WRITE
IN THIS SPACE**

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reappointing) DATE _____

**FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution. ☐ **\$5.00** May Be Added to Fees

U000000336881
04/27/05-80142-024 150.00

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	D POWELL, JASON M OWNER 1817 N FORSYTH RD ORLANDO, FL 32807
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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/21/05 407 832 8960
Date Daytime Phone #